

DECLARATION AND POWER OF ATTORNEY PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole (if only one name is listed below) or an original, first and joint (if plural names are listed below) inventor of the subject matter which is claimed and for which a patent application is sought on the invention entitled:

Method for Accessing Electrical Components with Gloved Hands the specification of which

[X] is attached hereto.		
[] was filed on,	as application Serial N	lo, and was amended or
I hereby state that I ha identified specification, including above.	ive reviewed and unde ng the claims, as amen	erstand the contents of the above- nded by any amendment referred to
		mation which is material to the tle 37, Code of Federal Regulations,
States application(s) listed bel of the application is not discl provided by the first paragrapl duty to disclose material inform	ow, and insofar as the sosed in the prior Unite hof Title 35, United Stanation as defined in Titleen the filing date of t	States Code, §120 of any United subject matter of each of the claims of States application in the manner ates Code, §112, I acknowledge the tle 37, Code of Federal Regulations, he prior application and the national
App'n Serial No.	Filing Date	Status (patented, pending, abandoned)
App'n Serial No.	Filing Date	Status (patented, pending, abandoned)

I hereby appoint Jerry K. Mueller, Jr., Reg. No. 27,576, Gerald L. Smith, Reg. No. 22,009, and Diane E. Burke, Reg. No. 45,725 jointly and each of them severally, my attorneys and attorney, with full power of substitution, delegation and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent and to transact all business in the Patent and Trademark Office connected therewith. I hereby direct that all correspondence be addressed to: Mueller and Smith, LPA, 7700 Rivers Edge Drive, Columbus, Ohio 43235, and all telephone calls be directed to Gerald L. Smith, at telephone number (614) 436-0600.



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Nestor Kolcio

Inventor's signature	_ Date		
Residence: Plain City, OH			
Citizenship: US			
Post Office Address: 11500 Jerome Road, Plain City, OH 43064			
Full name of second inventor: Bohdan R. Kolcio			
Inventor's signature	_Date		
Residence: New York, NY			
Citizenship: US			

Post Office Address: 314 West 83rd Street, Apt. 1, New York, NY 10024



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Inventor's signature

Residence: Plain City, OH

Citizenship: US

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Full name of second inventor: Bohdan R. Kolcio

Inventor's signature _

Residence: New York, NY

Citizenship: US

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